(Application Number)

(Application Number)

## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

and join a paten	t inventor (if plural t is sought on th	names are listed below) of the sub	e name is listed below) or an original, first ject matter which is claimed and for which TEST FOR PROSTHETIC STENT, the schecked:		
	The specification was filed on as United States Application Number or PCT International Application Number and was amended on (if applicable).				
		reviewed and understand the contended by any amendment referred t	tents of the above-identified specification o above.		
	wledge the duty to Federal Regulation		erial to patentability as defined in Title 37		
applicat applicat	ion(s) for patent or	inventor's certificate listed below:	d States Code, § 119(a)-(d) of any foreign and have also identified below any foreign late before that of the application on which		
Prior Fo	oreign Application(s	)	Priority Claimed		
(Numbe	er) (Country)	(Day/Month/Year Filed)	(Yes/No)		
(Numbe	er) (Country)	(Day/Month/Year Filed)	(Yes/No)		
-	claim the benefit union(s) listed below.	ander Title 35, United States Code,	§ 119(e) of any United States provisional		

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(Filing Date)

(Filing Date)

(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)
(Application Number)	(Filing Date)	(Status - patented, pending, abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

James H. Patterson (30,673), John F. Thuente (29,595), Wm Larry Alexander (37,269), Kimberly K. Baxter (40,504), Eric H. Chadwick (41,664), Randall T. Skaar (42,151), Douglas J. Christensen (35,480), Curtis B. Herbert (45,443), Michael A. Bondi (39,616), Paul C. Onderick (45,354), Brad D. Pedersen (32,432), Scott G. Ulbrich (48,005), David A. Olsen. (46,969), Peter S. Dardi (39,650), Jose W. Jimenez (31,113), Matthew T. Macari (P-50,291), and Hallie A. Finucane (33,172).

Address all telephone calls to: Peter S. Dardi at telephone number (612) 349-5746.

Address all correspondence to: Customer No. 24113

Peter S. Dardi, Ph.D.

Patterson, Thuente, Skaar & Christensen, P.A.

4800 IDS Center, 80 South 8th Street Minneapolis, Minnesota 55402-2100

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Steven D. Kruse Full name of first joint inventor, if any (given name, family name)				
Stem 9 km	28 DEC 01			
First Inventor's signature	Date			
Bloomington, Minnesota	U.S.A.			
Residence (City and either State or Foreign Country)	Citizenship			
6800 West Old Shakopee Road #322, Bloomington, Minnesota 55438				

Chad Q. Cai	_			
Full name of second joint inventor, if any (given name, family name)				
Charled	28 Dec, 01			
Second Inventor's signature	Date			
Č				
Woodbury, Minnesota	U.S.A.			
Residence (City and either State or Foreign Country)	Citizenship			
•				
1656 Colby Lake Drive, Woodbury, Minnesota 55125				
Mailing Address				